DECLARATI	ON AND	Attorney Docket Number	3Y0019Y							
POWER OF AT FOR UTILITY O		First Named Inventor	litsuru Ohkubo							
PATENT APPL		COMPLETE IF KNOWN								
(37 CFR 1.		Application Number		·						
Declaration Submitted with Initial OR Filing	Declaration Submitted after Initial	Filing Date								
	Filing (surcharge (37 CFR 1 16 (e))	Group Art Unit								
	required)	Examiner Name								
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name										
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I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
INDOLOPYRROLOCABAZOLE DERIVATIVE AND ANTITUMOR AGENT										
the annual Constitute of Contribute		(Title of the Invention)								
the specification of which bears the Attorney Docket Number and Title of the Invention noted above										
OR										
is attached hereto OR										
was filed on (MM/DD/YYYY) 07/21/2004 as United States Application Number or PCT International										
Application Number JP200		vas amended on (MM/DD/YYY		licable).						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability										
	as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application									
I hereby claim foreign priority benefits under 35 U S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.										
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Prior Forcign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed? YES NO						
PCT/JP03/09392	PCT	07/24/2003		\boxtimes						
PCT/JP2004/010742	PCT	07/21/2004	·	\boxtimes						
<u>, , , , , , , , , , , , , , , , , , , </u>										
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.										
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.										
Application Num	iber(s)	Filing Date (MM/DD/YYYY)	Attorney Docket N	umber						

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

designating the design of the	m the benefit under he United States of led in the prior Unit 2, I acknowledge th which became ava pplication.	America, listed ed States or PC e duty to discl	d below and, i T internation ose informati	insofar nal app on kno	as the s lication wn to n	subject in the ne to b	malter manner materi	of each of provided al to pate	the clain by the fi ntability	ms of th irst para as defir	nis application ngraph of ned in		
· ·	U.S. Parent Application Application Nu					Filing DD/YY			Parent Patent Number (if applicable)				
	Аррисации (чи	нист			(14141)	<i>DD/11</i>	***/			10-77	· · · · · · · · · · · · · · · · · · ·		
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Additional U.S or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.													
As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith: Practitioners Associated with the Customer Number 000210													
OR Registered practitioner(s) named below													
	Name		Registration		Name					Registration			
		-	Number							$\neg \vdash$	Number		
										-			
-													
		10	. [0	002	10 7								
Direct all cor	respondence to: X	Customer N	umber 0	002	10								
Name	Name												
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.													
Name of Sole or First Inventor: A petition has been filed for this unsigned inventor								nventor					
Given Name (first and middle [if any]) Family Name or Surname									е				
Mitsuru					Ohkubo)							
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X Additional	inventors are being n	amed on the 1	supplement	al Addi	tional In	ventors	(s) sheet(s) PTO/SB	/02A or (D2LR att	ached hereto.		

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any					Family Name or Surname								
Hiroharu					Arakawa								
Inventor's Signature		Girohans.	Aro	wo	non			Date	07-De			-2005	
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Name of Addition	al Jo	oint Inventor, if any:			A petition has been filed for this unsigned inventor							ntor	
Give	n Na	me (first and middle [if	any])	y]) Family Name or Surn					r Surnan	ie			
Inventor's Signature						<u> </u>		1	Date				
Residence: City			State		C	ountry			Citize		zenship		
Mailing Address													
City				State		ZI	P			Country		y	
Name of Addition		A petition has been filed for this unsigned inventor											
Given Name (first and middle [if					Family Name or Surname								
Inventor's Signature			· · · · · · · · · · · · · · · · · · ·					Date					
Residence: City			State		C	Country				Citizenship			
Mailing Address													
City				State	State ZIP		IP		Countr		y	_	
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor								
Given Name (first and middle [if an					Family Name or Surname								
Inventor's Signature				-					Date				
Residence: City		State		C	ountry				Citizenship				
Mailing Address													
City					State			ZIP		Country		ntry	